

**APPLICATION FOR LICENSE AS A  
PROPANE AND NATURAL GAS TECHNICIAN  
FOR PERSONS WORKING AS A TECHNICIAN IN THE  
INDUSTRY PRIOR TO JANUARY 1, 1996,  
FOR PERSONS COMPLETING AND PASSING CETP,  
AND FOR PERSONS PASSING THE STATE OF MAINE  
EXAMINATION**



Department of Professional and Financial Regulation  
Office of Licensing and Registration

**PROPANE AND NATURAL GAS BOARD**

35 State House Station  
Augusta, ME 04333-0035

Office Telephone: (207)624-8610  
Hearing Impaired: (207) 624-8563  
Website: [www.MaineProfessionalReg.org](http://www.MaineProfessionalReg.org)

Office located at: 122 Northern Avenue, Gardiner, Maine

# **APPLICATION INSTRUCTIONS**

## **License – Propane and Natural Gas Technician**

**COMPLETING THE APPLICATION FORM** – Answer all questions and return the following to this office:

- License application and payment for \$135.00 (Check made payable to: Treasurer State of Maine)
  - \$100.00 License Fee
  - \$20.00 Application Fee
  - \$15.00 Criminal Background Check Fee
- Proof of successful completion of CETP or State of Maine Examination

Incomplete applications will be returned.

**QUALIFICATIONS** – The Propane and Natural Gas Board issues one Propane and Natural Gas Technician license with endorsements as follows:

- **Delivery Technician** – This endorsement is required for persons who deliver propane at a customer's location. This endorsement is not required for a delivery technician to operate a motor vehicle.
- **Plant Operator** – This endorsement is required for persons who work at a bulk plant and handle propane and propane equipment.
- **Tank Setter and Outside Piping Technician** – This endorsement is required for persons who set and maintain propane tanks and outside piping.
- **Appliance Connection and Service Technician** – This endorsement is required for persons who install and service propane and natural gas appliances and indoor piping up to 500,000 BTUs per appliance.
- **Large Equipment Connection and Service Technician** – This endorsement is required for persons who install and service propane and natural gas appliances and indoor piping over 500,000 BTUs per appliance.

In order to become licensed with the Large Equipment Connection and Service Technician endorsement, an applicant must either:

- Hold a license as a technician with the Appliance Connection and Service Technician endorsement and pass the Large Equipment Connection and Service Technician examination; or
- Present proof to the Board of passage of the Basics and Appliance Connection and Service Technician examination and pass the Large Equipment Connection and Service Technician examination.

**CRIMINAL BACKGROUND CHECK** - Pursuant to 5 M.R.S.A. §5301-5303, the State of Maine is granted the authority to take into consideration an applicant's criminal history record. The Office of Licensing and Registration requires a criminal history records check as part of the application process for all applicants.

Public Law Chapter 401, sec. W1, amends Title 25 §1541, sub-§6 to allow the State Bureau of Identification to charge a fee to government organizations for services provided. Therefore, as of October 1, 1999 all criminal background checks of individuals are subject to a fee as determined by the Commissioner of Public Safety.

# PROPANE AND NATURAL GAS TECHNICIAN LICENSE APPLICATION

Revised: 4/30/03

STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF LICENSING AND REGISTRATION  
**PROPANE AND NATURAL GAS BOARD**  
35 STATE HOUSE STATION  
AUGUSTA, ME 04333  
TEL: (207)624-8610 FAX: (207)624-8637  
HEARING IMPAIRED: (207)624-8563

Office Use Only

Cash #: \_\_\_\_\_

License #: \_\_\_\_\_

Date Issued: \_\_\_\_\_

**4510-1446 \$ 20.00**

**4510-1421 \$100.00**

**4510-2619 \$15.00**

**APPLICATION FEE: \$ 20.00 (non-refundable)**

**LICENSE FEE: \$100.00**

**CRIMINAL BACKGROUND CHECK FEE: \$ 15.00**

**TOTAL DUE: \$135.00**

**MAKE CHECK PAYABLE TO: TREASURER STATE OF MAINE**

## LICENSE ENDORSEMENTS

- |   |   |
|---|---|
| <input type="checkbox"/> Delivery Technician                    | <input type="checkbox"/> Tank Setter and Outside Piping   |
| <input type="checkbox"/> Plant Operator                         | <input type="checkbox"/> Appliance Connection and Service |
| <input type="checkbox"/> Large Equipment Connection and Service |   |

**NOTICE REGARDING PUBLIC INFORMATION. CONTACT ADDRESS.** This application is a public record for purposes of Maine's Freedom of Access Law, 1 MRSA §401 et. seq. Public records must be made available to any person upon request. Information that you supply as part of this application is public information. Other licensing records to which this information may later be transferred are also considered public records. Where permitted by law, your name, license number, contact address and other information listed on this application may be posted on the State's website. Please indicate your contact address below to be used for mailing purposes and public notification including posting on the website.

**SOCIAL SECURITY NUMBER.** The following statement is made pursuant to the Privacy Act of 1974, Section 7(B). Disclosure of your social security number is mandatory. Solicitation of your social security number is solely for tax administration purposes pursuant to 36 M.R.S.A. Section 175 as authorized by the tax reform act of 1976 (42 U.S.C. Section 405(C)(2)(C)(I)). Your social security number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your social security number and it shall be treated as confidential tax information pursuant to 36 M.R.S.A. Section 191.

## NOTE: INCOMPLETE APPLICATIONS WILL BE RETURNED

Name of applicant: \_\_\_\_\_

Contact Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

County: \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex: ☐ Male ☐ Female

Any other names used: \_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic violation? ☐Yes ☐No  
If yes, please list date(s), crime(s) and submit a copy of the Judgment and Commitment and a letter from you explaining the circumstances surrounding your conviction.

**PLEASE CHECK ONLY ONE (1) OF THE FOLLOWING BOXES.**

☐ I HEREBY CERTIFY THAT I HAVE SUCCESSFULLY COMPLETED AND PASSED THE CERTIFIED EMPLOYEES TRAINING PROGRAM (CETP). I AM APPLYING FOR LICENSURE WITH ENDORSEMENTS AS DESCRIBED BELOW:

<u>ENDORSEMENT</u>	<u>TRAINING COURSE</u>	<u>COMPLETION DATE</u>
<input type="checkbox"/> Delivery Technician	_____	_____
<input type="checkbox"/> Plant Operator	_____	_____
<input type="checkbox"/> Tank Setter and Outside Piping Technician	_____	_____
<input type="checkbox"/> Appliance Connection and Service Technician	_____	_____

**PLEASE NOTE: YOU ARE REQUIRED TO FILE COPY(S) OF YOUR WALL CERTIFICATE(S) THAT YOU HAVE SUCCESSFULLY COMPLETED AND PASSED THE CERTIFIED EMPLOYEES TRAINING PROGRAM INCLUDING A CERTIFICATE THAT YOU HAVE SUCCESSFULLY COMPLETED AND PASSED THE BASIC TRAINING PROGRAM.**

**OR**

☐ I HEREBY CERTIFY THAT I WORKED AS A TECHNICIAN IN THE PROPANE OR THE NATURAL GAS INDUSTRY PRIOR TO JANUARY 1, 1996 AND I HAVE SUCCESSFULLY PASSED THE STATE OF MAINE LICENSE EXAMINATIONS. **PLEASE NOTE: YOU ARE REQUIRED TO FILE CERTIFICATE(S) THAT YOU HAVE SUCCESSFULLY PASSED THE EXAMINATION(S) TO BECOME LICENSED INCLUDING THE BASIC EXAMINATION.**

I HEREBY CERTIFY THAT THIS APPLICATION CONTAINS NO WILLFUL MISREPRESENTATION OR FALSIFICATION AND THAT THE INFORMATION GIVEN BY ME IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MY ANSWERS MAY BE VERIFIED AND THAT I MAY BE DECLARED INELIGIBLE FOR A LICENSE CERTIFICATE IF THE INFORMATION CONTAINED HEREIN, UPON INVESTIGATION, IS FOUND TO BE MISREPRESENTED OR FALSIFIED.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



JOHN ELIAS BALDACCI  
GOVERNOR

STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL  
AND FINANCIAL REGULATION  
OFFICE OF LICENSING AND REGISTRATION  
**PROPANE AND NATURAL GAS BOARD**  
35 STATE HOUSE STATION  
AUGUSTA, MAINE  
04333-0035

ANNE L. HEAD  
DIRECTOR



### AUTHORIZATION OF CREDIT CARD PAYMENT

**Fees owed to this Department may be paid by the use of a credit card. If you wish to pay your fee(s) with your credit card, please complete this form and send it with your application. Payment through credit cards will not be processed without this authorization form.**

Name of applicant:		
Mailing Address of applicant:		
City:	State:	Zip Code:
County:	Telephone #: (____)_____-_____	
Name of cardholder (if other than applicant):		
Mailing Address (if other than applicant):		
City:	State:	Zip Code:

I authorize the State of Maine, Department of Professional & Financial Regulation, Office of Licensing & Registration to charge my ? Visa ? MasterCard _____-_____-_____-_____ Exp Date _____/_____ in the amount of \$_____ Signature: _____ Date: _____		
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PHONE: (207)624-8610  
(Office Phone)



(207)624-8653 (HEARING IMPAIRED)

FAX: (207)624-8637